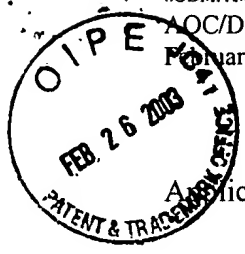


1642\$



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Junming Le, Jan Vilcek, Peter Daddona, John Ghrayeb, David M. Knight and Scott Siegel

Application No.: 09/756,398 Group: 1642

Filed: January 8, 2001 Examiner: Canella, K.

Confirmation No.: 7001

For: ANTI-TNF ANTIBODIES AND PEPTIDES OF HUMAN TUMOR NECROSIS FACTOR

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, P.O. Box 2327, Arlington, VA 22202	
on <u>2/21/03</u>	<u>Rachel Cohen</u>
Date	Signature
Rachel Cohen	
Typed or printed name of person signing certificate	

RECEIVED  
MAR 05 2003  
TECH CENTER 1600/2900

Assistant Commissioner for Patents  
P.O. Box 2327  
Arlington, VA 22202

Sir:

Transmitted herewith is a Reply and a Terminal Disclaimer for filing in the above-identified application.

[ ] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

[ ] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)	(COL. 2)	(COL. 3)	(COL. 4)	(COL. 5)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	20	MINUS	* 23	0
INDEP	14	MINUS	** 17	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

SMALL ENTITY		
	RATE	ADDIT. FEE
X	\$ 9	\$
X	\$42	\$
+	\$140	\$

OTHER THAN SMALL ENTITY		
	RATE	ADDIT. FEE
X	\$18	\$
X	\$84	\$
+	\$280	\$

OR

\* not fewer than 20  
\*\* not fewer than 3

TOTAL = \$ 0

TOTAL = \$ 0

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [            ] month Extension of Time	\$ _____
<input type="checkbox"/>	Amendment Fee	\$ _____
<input type="checkbox"/>	Other Fees:	
	_____	\$ _____
	_____	\$ _____
	TOTAL:	\$ 0

A check is enclosed in payment of the following fees:

<input type="checkbox"/>	Petition for [            ] month Extension of Time	\$ _____
<input type="checkbox"/>	Amendment Fee	\$ _____
<input checked="" type="checkbox"/>	Other Fees:	
	Terminal Disclaimer Fee	\$        110
		\$ _____
		\$ _____
	<b>TOTAL:</b>	<b>\$        110</b>

[X] A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Deirdre E. Sanders  
Deirdre E. Sanders  
Registration No.: 42,122  
Telephone (978) 341-0036  
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Concord, Massachusetts 01742-9133

Dated: February 21, 2003